

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

LCV Victory Fund

ADDRESS (number and street) ▼

1920 L St NW Ste 800

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00486845

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

**4. TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)  
☐ July 15 Quarterly Report (Q2)  
☐ October 15 Quarterly Report (Q3)  
☐ January 31 Year-End Report (YE)  
☐ July 31 Mid-Year Report (Non-election Year Only) (MY)  
☐ Termination Report (TER)

- (b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)  
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)  
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☒ Oct 20 (M10) ☐ Jan 31 (YE)

- (c) 12-Day ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)  
PRE-Election Report for the: ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

- (d) 30-Day ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)  
POST-Election Report for the:

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period 09 / 01 / 2015 through 09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Patrick Collins

Signature of Treasurer

Patrick Collins

[Electronically Filed]

Date

10

16

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LCV Victory Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 09 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		636934.95
(b) Cash on Hand at Beginning of Reporting Period.....	758775.20	
(c) Total Receipts (from Line 19) .....	117848.86	270619.91
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	876624.06	907554.86
7. Total Disbursements (from Line 31) .....	10397.36	41328.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	866226.70	866226.70
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LCV Victory Fund

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
09		01		2015

To:

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

111101.00

225492.00

(ii) Unitemized .....

6136.00

43143.32

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

117237.00

268635.32

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

500.00

1000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

117737.00

269635.32

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

111.86

984.59

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

117848.86

270619.91

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

117848.86

270619.91

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	10397.36	41204.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10397.36	41204.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	124.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	124.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10397.36	41328.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10397.36	41328.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	117737.00	269635.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	124.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	117737.00	269511.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	10397.36	41204.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	10397.36	41204.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher Ahrens**

Mailing Address 3715 W 65th St

City

Mission Hills

State

KS

Zip Code

66208-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gilmore & Bell, P.C.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 25 / 2015

**Transaction ID : ABFB7C5A342E941E9A11**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. John Arnsperger**

Mailing Address 2606 Coastal Oak Dr

City

Houston

State

TX

Zip Code

77059-6448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 06 / 2015

**Transaction ID : AB47BA0CF686F4657932**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Mary BARRETT**

Mailing Address 10 Crestmont Rd Apt 4m

City

Montclair

State

NJ

Zip Code

07042-1933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 23 / 2015

**Transaction ID : A8A597B2384DF47D8B83**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Mr. Thomas Barron

Mailing Address 545 Pearl St

City	State	Zip Code
Boulder	CO	80302-5001

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	5		

Transaction ID : AFF208D17538F447EB5F

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

B. Dr. Edith F. Borie

Mailing Address Friedrich-Naumann Str. 109

City	State	Zip Code
New Paltz		76187

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		0	1		2	0	1	5		

Transaction ID : A6786447107184A949DD

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Charles Brodhead

Mailing Address 2277 Osborne Rd

City	State	Zip Code
Chittenango	NY	13037-8791

FEC ID number of contributing federal political committee.

C

Name of Employer

Credit Suisse

Occupation

Trader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		0	2		2	0	1	5		

Transaction ID : AEC7D27A1A6624D86AA3

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

100175.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Brooke Dudley**

Mailing Address 3000 McCollie Ave

City

Anchorage

State

AK

Zip Code

99517-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Providence Alaska Medical Center

Occupation

Physical Therapist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2015

Transaction ID : AD258920B159344EBB09

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Sarah Faulkner**

Mailing Address 108 Sumach St

City

Lookout Mountain

State

TN

Zip Code

37350-1132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Transaction ID : A6C1D4DBBF4FB43D4834

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Catherine Finn**

Mailing Address 2761 James River Rd

City

Howardsville

State

VA

Zip Code

24562-2523

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

writer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2015

Transaction ID : A55F6E7F1640A480A83C

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Tessa Flores**

Mailing Address 154 Compton Rd

City	State	Zip Code
Ithaca	NY	14850-9455

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	1	5

Transaction ID : A7AE037A5575A40729E4

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Kathleen Frangione**

Mailing Address 1808 Kilbourne PI NW

City	State	Zip Code
Washington	DC	20010-2623

FEC ID number of contributing federal political committee.

C

Name of Employer

McBee Strategic Consulting

Occupation

Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Transaction ID : A031677B73B33401B9E7

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. David Goldston**

Mailing Address 816 N Highland St

City	State	Zip Code
Arlington	VA	22201-2041

FEC ID number of contributing federal political committee.

C

Name of Employer

Nrdc

Occupation

Director Of Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	5

Transaction ID : AC36C719B9D834AF4A2E

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1025.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Joseph P Hamilton**

Mailing Address 5130 W Winona St

City

Chicago

State

IL

Zip Code

60630-2332

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Systems Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	1	5		

Transaction ID : A7C93C581939943E6A17

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Georgia Herbert**

Mailing Address PO Box 21

City

The Plains

State

VA

Zip Code

20198-0021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Georgia H. Herbert, PC

Occupation

lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	5		

Transaction ID : ABAAAE2794A2A4CC7A36

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mr. John Hunting**Mailing Address 60 Monroe Center St NW Apt 6a  
Apt 6A

City

Grand Rapids

State

MI

Zip Code

49503-2929

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	5		

Transaction ID : A4CD771F1961944A38B2

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Alan Jacobson**

Mailing Address 66 Fairview St

City

Westwood

State

MA

Zip Code

02090-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Psychologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : A495F259B847040C2BD2

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Diane Karp**

Mailing Address 939 Don Cubero Ave

City

Santa Fe

State

NM

Zip Code

87505-1616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Art Historian

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2015

Transaction ID : A8E2BDA8D785A4556A6E

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Catherine Lavelle**

Mailing Address 1140 Connecticut Ave NW Ste 800

City

Washington

State

DC

Zip Code

20036-4010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Engine Message &amp; Media

Occupation

Partner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : A01B8266FC80A49CFB77

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

560.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Susan Lonergan**

Mailing Address 1206 Chautauqua Blvd

City	State	Zip Code
Pacific Palisades	CA	90272-2603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Pilates/Yoga Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2015

**Transaction ID : A609935E6775A473187A**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Frank Loy**

Mailing Address 3230 Reservoir Rd NW

City	State	Zip Code
Washington	DC	20007-2955

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GERMAN MARSHALL FUND

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

**Transaction ID : A8BF76EBE522049D1994**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Laura Mandel**Mailing Address 340 W 55th St Apt 4a  
Apt 4A

City	State	Zip Code
New York	NY	10019-3747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

**Transaction ID : AC9F5CD97331D4D558F0**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

300.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 31  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Ruth McCreery**

Mailing Address 199 Mansfield St

City

New Haven

State

CT

Zip Code

06511-3536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Word Works

Occupation

Translator

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : A69C45CBDFE44484FB4F

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. William Meadows**

Mailing Address 1015 33rd St NW Apt 702

City

Washington

State

DC

Zip Code

20007-3525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Wilderness Society

Occupation

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : AC7746FA744ED421490D

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Gueta Mezzetti**

Mailing Address 5301 Broad Branch Rd NW

City

Washington

State

DC

Zip Code

20015-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mezzetti &amp; Associates

Occupation

Consultant

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : A3012C8BC6D514960B51

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1025.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Kathryn Mueller**

Mailing Address 317 Travis Ln

City

Hewitt

State

TX

Zip Code

76643-3102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baylor University

Occupation

College Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	5		

Transaction ID : A92F66327002E4CB7B84

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Patricia Munoz**

Mailing Address 3814 Albemarle St NW

City

Washington

State

DC

Zip Code

20016-1838

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	5		

Transaction ID : A3FE9593CC48849C7A8F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Heather Phillips**

Mailing Address 1465 N Davis Rd

City

Bolton

State

MS

Zip Code

39041-9591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American School of Kuwait

Occupation

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	5		

Transaction ID : A798096EB4F00477CBB6

Amount of Each Receipt this Period

12.00

SUBTOTAL of Receipts This Page (optional)..... ►

537.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

## **A. Heather Phillips**

Mailing Address 1465 N Davis Rd

City State Zip Code  
Bolton MS 39041-9591

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
American School of Kuwait Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 24 / 2015

**Transaction ID : A42AF8941EFF443F4B13**

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

## **B. Precision Strategies, LLC**

Mailing Address 1121 14th Street NW, Suite 700

City State Zip Code  
Washington DC 20005-5619

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 11 / 2015

**Transaction ID : A1316953933FF426692C**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Barbara Pyle**

Mailing Address 4221 Brookview Dr SE

City State Zip Code  
Atlanta GA 30339-4606

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Retired film maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2015

**Transaction ID : A2653881F1FE44BBAB63**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

637.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

## **A. Robin Schmidt**

Mailing Address PO Box 19

City State Zip Code  
Indianola WA 98342-0019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

09 / 30 / 2015

**Transaction ID : A7EDA720117CD47E9917**

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

## **B. Deirdre Sheerr-Gross**

Mailing Address 1452 Little Sunapee Rd

City State Zip Code  
New London NH 03257-5319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sheerr & White Res. Architecture

Occupation

Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 27 / 2015

**Transaction ID : A551D97B2081948B598C**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Kathlin Sickel**

Mailing Address 122 W Mission Rd

City State Zip Code  
Green Bay WI 54301-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Freelance Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

09 / 01 / 2015

**Transaction ID : A30ADEC9CF0F84EB7BE4**

Amount of Each Receipt this Period

12.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1137.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Kathlin Sickel**

Mailing Address 122 W Mission Rd

City

Green Bay

State

WI

Zip Code

54301-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Freelance Writer

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	5		

Transaction ID : A6E88F4633D0E4C699BA

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Gerald Smith**

Mailing Address 1109 Geddes Ave

City

Ann Arbor

State

MI

Zip Code

48109-1079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University Of Michigan

Occupation

Professor

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	5		

Transaction ID : A8C74B8B1CD734E1C9A1

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Lowell Smith**

Mailing Address 2548 Crums Church Rd

City

Berryville

State

VA

Zip Code

22611-2016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Scientist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	5		

Transaction ID : AF81E544BC165453CB7A

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 31  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

## **A. Joshua Stanbro**

Mailing Address 2752 Waiomao Rd

City State Zip Code  
Honolulu HI 96816-3430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hawaii Community Foundation

Occupation

Program Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2015

**Transaction ID : A2CB18359FCEA4CC5998**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. William Stetson**

Mailing Address 139 Elm St

City State Zip Code  
Norwich VT 05055-9445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Boatwright Foundation Inc.

Occupation

Film Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 15 / 2015

**Transaction ID : A23BDBCBB667A48A1AD5**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Louise Tate**

Mailing Address 55 Deake St

City State Zip Code  
South Portland ME 04106-3108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 03 / 2015

**Transaction ID : ABF53561C6AB142709DE**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 31  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Terris, Barnes & Walters**Mailing Address 400 Montgomery St  
Suite 700

City	State	Zip Code
San Francisco	CA	94104-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : A3C8316379A4649F4B18

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Robert Thomas**

Mailing Address 230 Lynx Ct

City	State	Zip Code
Fremont	CA	94539-6051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2015

Transaction ID : AC014B77EE60A4C7BA45

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. J. Toscano**

Mailing Address 1347 CONSTITUTION AVE NE

City	State	Zip Code
Washington	DC	20002-6419

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

GMMB Inc

Media Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Transaction ID : A56740E6B19B44BBEA45

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 31

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Charles Turk**

Mailing Address 100 Broadway Ave

City

Wilmette

State

IL

Zip Code

60091-3463

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Psychiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 22 / 2015

**Transaction ID : A25D5BB4E1548461C91D**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Laura Turner Seydel**

Mailing Address 348 Manor Ridge Dr NW

City

Atlanta

State

GA

Zip Code

30305-3508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Turner Foundation

Occupation

Philanthropist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 02 / 2015

**Transaction ID : ACEB2B997E3A04276B5A**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Donnell Van Noppen**

Mailing Address 6221 Chabot Rd

City

Oakland

State

CA

Zip Code

94618-1612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Earthjustice

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 01 / 2015

**Transaction ID : AE49DC3D76DE34F82B9C**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Wesley Warren**

Mailing Address 1200 New York Ave NW Ste 400

City	State	Zip Code
Washington	DC	20005-3929

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nrdc

Occupation

Director of Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2015

Transaction ID : A1F9EF3C2BEB4C668D5

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Jeffrey Watkiss**

Mailing Address 2030 Plymouth St NW

City	State	Zip Code
Washington	DC	20012-2214

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McDermott Will &amp; Emery LLP

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : A4485735DB92146258E3

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Phoebe Weseley**

Mailing Address 455 Bunn Rd

City	State	Zip Code
Bedminster	NJ	07921-2967

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2015

Transaction ID : A59C60AE4421E4160873

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1025.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 31  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

## **A. Heather White**

Mailing Address 910 Heather Ave

City State Zip Code  
Takoma Park MD 20912-5832

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Environmental Working Group Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 03 2015

**Transaction ID : A7468BA81DCEB4B95810**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Robert White**

Mailing Address 12712 Sunset Ridge PI NE

City State Zip Code  
Albuquerque NM 87111-8172

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
clinic Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 21 2015

**Transaction ID : AD56437A7A2B44047AB0**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Dianne Winne**

Mailing Address 4332 Everett Ave

City State Zip Code  
Oakland CA 94602-1759

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Retired Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2015

**Transaction ID : A4BB02535EE5F46E9877**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LCV Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Bonnie Yelverton**

Mailing Address 7234 Annapolis Way

City State Zip Code  
 Fontana CA 92336-0856

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

science and math teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2015

**Transaction ID : A3877B742F60349B0BC7**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Heather Zichal**

Mailing Address 1441 S Carolina Ave SE

City State Zip Code  
 Washington DC 20003-2329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Global Energy Center

Occupation

Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A216EC5C0692F4CA68BF**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

525.00

**TOTAL** This Period (last page this line number only)..... ►

111101.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

## **A. POPULATION CONNECTION ACTION FUND PAC**

Mailing Address 2120 L ST NW SUITE 500

City State Zip Code  
WASHINGTON DC 20037

FEC ID number of contributing  
federal political committee.

C C00564799

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 01 2015

Transaction ID : A4D50FA5F78C941C6945

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

500.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 31  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Suntrust Bank**

Mailing Address PO Box 622227

City	State	Zip Code
Orlando	FL	32862-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : AED41702769AA490B94C

Amount of Each Receipt this Period

111.86

Interest

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

111.86

TOTAL This Period (last page this line number only)..... ►

111.86

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## LCV Victory Fund

### A. Green Plate Catering

Mailing Address 11307 Elkin Street

City	State	Zip Code
Wheaton	MD	20902-4609

Purpose of Disbursement	Catering
1. <u>Food and Beverage</u>	<ul style="list-style-type: none"> <li>• <u>Food</u></li> <li>• <u>Beverage</u></li> </ul>
2. <u>Staff</u>	<ul style="list-style-type: none"> <li>• <u>Staff</u></li> </ul>
3. <u>Other</u>	<ul style="list-style-type: none"> <li>• <u>Other</u></li> </ul>

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement



Transaction ID : B1165B15330C74A22A48

Amount of Each Disbursement this Period

4470.00

Full Name (Last, First, Middle Initial)

**B. League of Conservation Voters, Inc.**

Mailing Address 1920 L St NW  
Ste 800

City	State	Zip Code
Washington	DC	20036-5045

Purpose of Disbursement	Staff and Email for Fundraising Event
-------------------------	---------------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

09 / 10 / 2015

Transaction ID : B7DF814FCC0A64C4BBA6

Amount of Each Disbursement this Period

32.70

Full Name (Last, First, Middle Initial)

C. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW  
Ste 800

City	State	Zip Code
Washington	DC	20036-5045

Purpose of Disbursement	Admin and Compliance Support
-------------------------	------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : B9104979EF881414F8EC

Amount of Each Disbursement this Period

1660.30

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6163.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## LCV Victory Fund

Category/  
Type

29.26

State:  District:

MM / DD / YYYY

Category/  
Type

State:  District:

Category/  
Type

State:  District:

Age Group	Number of People
10-19	10
20-29	20
30-39	30
40-49	40
50-59	50
60-69	60
70-79	70
80-89	80
90-99	52.83

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## LCV Victory Fund

Three credit cards are shown side-by-side. The first card displays the number 09, the second displays 21, and the third displays 2015. Each card has a small logo in the top left corner consisting of two letters and a small square.

Category/  
Type

1085.00

State:  District:

Three digital displays showing the date 09/21/2015 in MM/DD/YYYY format. The first display shows '09' with 'M' indicators above it. The second display shows '21' with 'D' indicators above it. The third display shows '2015' with 'Y' indicators above it.

Category/  
Type

State:  District:

1085.00

Postage - Mott Invitation &amp; Sponsor Letters

Category/  
Type

State:  District:

1443.49

2528.49

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 31

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

**A. Mosaic Express**Mailing Address 1920 L St NW  
Street Level

City Washington State DC Zip Code 20036-5004

Purpose of Disbursement  
Mott invitation printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 21 2015

Transaction ID : BEC6C14AE43D14FD8AB7

Amount of Each Disbursement this Period

538.48

Full Name (Last, First, Middle Initial)

**B. Shannon Ryan**

Mailing Address 630 Princeton Pl. NW

City Washington State DC Zip Code 20010-1605

Purpose of Disbursement  
Design

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 21 2015

Transaction ID : B828FDD359B0143E493C

Amount of Each Disbursement this Period

65.00

Full Name (Last, First, Middle Initial)

**C. Kat Saunders**

Mailing Address 2737 Devonshire Place

City Washington State DC Zip Code 20008-3479

Purpose of Disbursement  
Venue Staff Costs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 30 2015

Transaction ID : B94956AC7A64849FF8E5

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

703.48

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## LCV Victory Fund

### A. Suntrust Bank

Mailing Address PO Box 622227

City	State	Zip Code
Orlando	FL	32862-2227

Purpose of Disbursement
Paypal Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

**Transaction ID : BC518D915DC104DD588A**

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	24.81
25-34	24.81
35-44	24.81
45-54	24.81
55-64	24.81
65-74	24.81
75-84	24.81
85+	24.81

Full Name (Last, First, Middle Initial)

### B. Suntrust Bank

Mailing Address PO Box 62227

City	State	Zip Code
Orlando	FL	32862-2227

### Purpose of Disbursement

#### Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : B685E96FFED2C4656B5F

Amount of Each Disbursement this Period

69.75

Full Name (Last, First, Middle Initial)

### C. Suntrust Bank

Mailing Address PO Box 62227

City	State	Zip Code
Orlando	FL	32862-2227

#### Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : B69143E56EB7A473E823

Amount of Each Disbursement this Period

535.96

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

846.52

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## LCV Victory Fund

### A. Woodsboro Bank

Mailing Address 5 N Main St

City	State	Zip Code
Woodsboro	MD	21798-8816

[illegible]

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

**Transaction ID : BFDD3E8CF2D3841829B0**

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.4%
25-34	14.3%
35-44	18.2%
45-54	22.1%
55-64	26.0%
65-74	29.9%
75+	33.8%

Full Name (Last, First, Middle Initial)

### B. Woodsboro Bank

Mailing Address 5 N Main St

City	State	Zip Code
Woodsboro	MD	21798-8816

Purpose of Disbursement	Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

**Transaction ID : B3ADC7E2492CF4DB6839**

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.4
25-34	15.6
35-44	18.8
45-54	22.1
55-64	25.3
65-74	28.5
75-84	31.7
85+	51.23

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Date of Disbursement

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

103.04

10397.36